

IN THE UNITED STATES BANKRUPTCY COURT FOR
THE EASTERN DISTRICT OF TENNESSEE
NORTHERN DIVISION

IN RE: **ANGELA LYNETTE YOUNG**
 Debtor

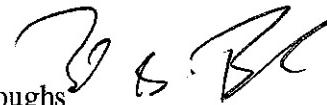
Case No. 3:14-bk-33243-SHB
Chapter 13

NOTICE OF AMENDED SCHEDULES I & J

Comes now the Debtor, by and through counsel, and would respectfully show this Court that Amended Schedules I & J are being filed in this case for the following reason:

1. To update income and expenses.

Respectfully submitted this the 21st day of January, 2019.


/s/ Zachary S. Burroughs
Zachary S. Burroughs, #025896
Clark & Washington, LLC
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Fill in this information to identify your case:	
Debtor 1	<u>Angela Lynette Young</u>
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF TENNESSEE</u>	
Case number (if known)	<u>3:14-bk-33243-SHB</u>

Check if this is:

- An amended filing
 A supplement showing post-petition chapter 13 income as of the following date:
1/03/2019
 MM / DD / YYYY

Official Form B 6I

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Debtor 1

Debtor 2 or non-filing spouse

Employed

Not employed

Employed

Not employed

Occupation

Medical Assistant

Employer's name

Allegheny Clinic

Employer's address

320 East North Ave
Pittsburgh, PA 15212

How long employed there?

2 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>2,930.14</u>	\$ <u>0.00</u>
3. Estimate and list monthly overtime pay.	3. +\$ <u>0.00</u>	+\$ <u>0.00</u>
4. Calculate gross income. Add line 2 + line 3.	4. \$ <u>2,930.14</u>	\$ <u>0.00</u>

Debtor 1 Angela Lynette Young

Case number (if known) 3:14-bk-33243-SHB

Copy line 4 here

	For Debtor 1	For Debtor 2 or non-filing spouse
4.	\$ <u>2,930.14</u>	\$ <u>0.00</u>

5. List all payroll deductions:

- 5a. Tax, Medicare, and Social Security deductions
- 5b. Mandatory contributions for retirement plans
- 5c. Voluntary contributions for retirement plans
- 5d. Required repayments of retirement fund loans
- 5e. Insurance
- 5f. Domestic support obligations
- 5g. Union dues
- 5h. Other deductions. Specify: _____

5a.	\$ <u>564.50</u>	\$ <u>0.00</u>
5b.	\$ <u>0.00</u>	\$ <u>0.00</u>
5c.	\$ <u>117.20</u>	\$ <u>0.00</u>
5d.	\$ <u>0.00</u>	\$ <u>0.00</u>
5e.	\$ <u>223.77</u>	\$ <u>0.00</u>
5f.	\$ <u>0.00</u>	\$ <u>0.00</u>
5g.	\$ <u>0.00</u>	\$ <u>0.00</u>
5h.+	\$ <u>0.00</u>	+ \$ <u>0.00</u>

6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.

6. \$ 905.47 \$ 0.00

7. Calculate total monthly take-home pay. Subtract line 6 from line 4.

7. \$ 2,024.67 \$ 0.00

8. List all other income regularly received:

- 8a. Net income from rental property and from operating a business, profession, or farm
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.
- 8b. Interest and dividends
- 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.
- 8d. Unemployment compensation
- 8e. Social Security
- 8f. Other government assistance that you regularly receive
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.
Specify: _____
- 8g. Pension or retirement income
- 8h. Other monthly income. Specify: _____

8a.	\$ <u>0.00</u>	\$ <u>0.00</u>
8b.	\$ <u>0.00</u>	\$ <u>0.00</u>
8c.	\$ <u>0.00</u>	\$ <u>0.00</u>
8d.	\$ <u>0.00</u>	\$ <u>0.00</u>
8e.	\$ <u>0.00</u>	\$ <u>0.00</u>

9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.

9. \$ 0.00 \$ 0.00

10. Calculate monthly income. Add line 7 + line 9.

10. \$ 2,024.67 + \$ 0.00 = \$ 2,024.67

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.

11. State all other regular contributions to the expenses that you list in Schedule J.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.
Specify: _____

11. +\$ 0.00

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.

Write that amount on the *Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data*, if it applies

12. \$ 2,024.67

Combined monthly income

13. Do you expect an increase or decrease within the year after you file this form?

No.

Yes. Explain: Debtor's Income is Base on TYD on Paystub dated 1/03/19

Fill in this information to identify your case:

Debtor 1	<u>Angela Lynette Young</u>
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	<u>EASTERN DISTRICT OF TENNESSEE</u>
Case number (If known)	<u>3:14-bk-33243-SHB</u>

Check if this is:

- An amended filing
 A supplement showing post-petition chapter 13 expenses as of the following date:
1/03/2019
MM / DD / YYYY

- A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J

Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents? No

Do not list Debtor 1 and
Debtor 2.

Yes. Fill out this information for
each dependent.....

Dependent's relationship to
Debtor 1 or Debtor 2

Dependent's
age

Does dependent
live with you?

- No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes

3. Do your expenses include
expenses of people other than
yourself and your dependents? No
 Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 6I.)



Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 450.00

If not included in line 4:

- 4a. Real estate taxes
4b. Property, homeowner's, or renter's insurance
4c. Home maintenance, repair, and upkeep expenses
4d. Homeowner's association or condominium dues
5. Additional mortgage payments for your residence, such as home equity loans

4a. \$ 0.00
4b. \$ 0.00
4c. \$ 0.00
4d. \$ 0.00
5. \$ 0.00

Debtor 1 Angela Lynette Young

Case number (if known) 3:14-bk-33243-SHB

6. Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: _____	6a. \$ <u>100.00</u> 6b. \$ <u>40.00</u> 6c. \$ <u>186.00</u> 6d. \$ <u>0.00</u>
7. Food and housekeeping supplies	7. \$ <u>400.00</u>
8. Childcare and children's education costs	8. \$ <u>0.00</u>
9. Clothing, laundry, and dry cleaning	9. \$ <u>20.00</u>
10. Personal care products and services	10. \$ <u>20.00</u>
11. Medical and dental expenses	11. \$ <u>0.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <u>288.00</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ <u>0.00</u>
14. Charitable contributions and religious donations	14. \$ <u>0.00</u>
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: _____	15a. \$ <u>0.00</u> 15b. \$ <u>0.00</u> 15c. \$ <u>150.00</u> 15d. \$ <u>0.00</u>
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ <u>0.00</u>
17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: _____ 17d. Other. Specify: _____	17a. \$ <u>0.00</u> 17b. \$ <u>0.00</u> 17c. \$ <u>0.00</u> 17d. \$ <u>0.00</u>
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6l).	18. \$ <u>0.00</u>
19. Other payments you make to support others who do not live with you. Specify: _____	\$ <u>0.00</u> 19.
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues	20a. \$ <u>0.00</u> 20b. \$ <u>0.00</u> 20c. \$ <u>0.00</u> 20d. \$ <u>0.00</u> 20e. \$ <u>0.00</u> 21. +\$ <u>60.00</u>
22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses.	22. \$ <u>1,714.00</u>
23. Calculate your monthly net income. 23a. Copy line 12 (<i>your combined monthly income</i>) from Schedule I. 23b. Copy your monthly expenses from line 22 above.	23a. \$ <u>2,024.67</u> 23b. -\$ <u>1,714.00</u>
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$ <u>310.67</u>
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?	
<input checked="" type="checkbox"/> No.	
<input type="checkbox"/> Yes.	
Explain: _____	

UNSWORN DECLARATION UNDER PENALTY OF PERJURY
TO AMENDED SCHEDULE I & J

I, Angela Lynnette Young, declare under penalty of perjury that I have read the above statement and the matters stated therein are true and correct to the best of my knowledge, information and belief.

DATED: 1/14/19

/s/ ANGELA LYNNETTE YOUNG

Angela Lynnette Young

IN THE UNITED STATES BANKRUPTCY COURT FOR THE
EASTERN DISTRICT OF TENNESSEE
NORTHERN DIVISION

In re: ANGELA LYNNETTE YOUNG
Debtor

Case No. 3:14-BK-33243-SHB
Chapter 13

CERTIFICATE OF SERVICE

The undersigned hereby certifies that true and exact copies of the foregoing Amended Schedules I & J have been forwarded to the following by depositing in the U.S. Mail, postage prepaid, and/or Electronic Case Filing (ECF) on January 21, 2019.

Office of the United States Trustee (ECF)
Howard H. Baker, Jr., U.S. Courthouse
800 Market Street Ste 114
Knoxville, TN 37902

Gwendolyn M. Kerney (ECF)
Chapter 13 Trustee
P.O. Box 228
Knoxville, TN 37901

Angela Lynnette Young (US MAIL)
200 Cleveland Street
Butler, PA 16001

/s/ Zachary S. Burroughs
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Dated: January 21, 2019